POSTMANK ILLESIOLE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? FINANCIAL DISCLOSURE STATEMENT EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the **UNITED STATES HOUSE OF REPRESENTATIVES** exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? FILER end of the reporting period? gr. b. Receive more than \$200 in unearned income from any reportable asset during the reporting period: Kara Eastmar × **Employing Office:** U.S. House of Representatives New Officer or Employee Candidates - Date of Election: New Member of or Candidate for THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" 11/6/18 District()2 State: NE Shared Staff Filer Type (If Applicable): ***** 4 3 × × × Daytime Telephone For New Members, Candidates, and New Employees Principal Assistant 중 Z Z J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the data of filing? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? FORM B b Period Covered: January 1, b Present × Check if Amendment 2017 A \$200 penalty shall be assessed against any individual who files more than 30 days late. U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTER 18 JUN 21 PM 1: 22 (Office Use Only) **₹** 3 ¥ 00 ¥85 3 × Page 1 of Z Š č S × × ×

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| Γ Ι | sp Principal/Creighton | dc NEST college sav 529 | SP, Especial Especial State of | For restals and other real property held for investment provide a complete address or description, e.g., rental property, and sich and side. For an ownership miserest in a privately-held business that is not publicly traded, easte the name of the business, the nature of its activities, and dis geographic location in Block A. Excluder: Your personal residence, including second fromes and vacistion homes (unless there was rental income during the reporting persod), and any financial income during the reporting persod. Income the report a privately-traded from a federal retirement program, including the Thrift Sevings Plan. If you report a privately-traded fund that is an Excepted Investment Fund, please check the "Elifibox." If you so choose, you may indicate that an asset of income source is that of your spousa (SP) or dependent chid (DC), or jointy field with anyone (JT) in the optional column on the fair left. For a detailed discussion of Sohodule A requirements, please orier to the instruction booklet. | For bank and other cash accounts, total the amount in all interest-bearing accounts. If the local is over \$5,000, lat every financial institution where there is more than \$1,000 in interest-bearing accounts. | Provide complete names of stocks and mutual funds (do not use only ticker symbols). For all IRAs and other retirement plans (such as 401k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. | identity (8) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period and (i) any other reportable asset or separate income which generated more than \$200 an "unearned" income during the year. | Assets and/or income Sources | BLOCK A | SCHEDULE A – ASSETS |
|-----|------------------------|-------------------------|--|---|---|--|--|------------------------------|---------|---------------------|
| × | | × | /ngetone X | ## ## ## ## ## ## ## ## ## ## ## ## ## | 2 C C C C C C C C C C C C C C C C C C C | *Column M is for assets held by your spouse or dependent child in which you have no interest. | Indicate value of asset at close of the reporting period it you use a valuation method other than fair market value, please specify the method used. If an asset was add during the reporting period and is included only because it generated income, the value should be those. | Value of Asset | BLOCK B | & "UNEARNED INCOME" |
| × | × | × | Royalises Parineralise fuccina | MONE DIVIDENOS RENT INTEREST CAPITAL GAINS EXCEPTED SLIND TRUST TAX-DEFERRED Other Type of Income (Specify e.g., Patnership Income or Farm Income) | | the asset generated no in reporting period. | Check all columns that apply. For accounts that generals tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends the "Tax-Deferred" column. Dividends interest, and capital galins, even if reinvested, must be disclosed as income for assess held in taxable accounts. Check | Type of Income | вгоск с | Name: Kara |
| × | X | X | × × × × × × × × × × × × × × × × × × × | ## ## ## ## ## ## ## ## ## ## ## ## ## | Current Year Preceding Year Preceding Xear XI XI I II III III IV V VI VII VII XX XX XI XI I II III I | | For assals for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other flagests indicate the category of income by checking the appropriate box below. Dividends, interest, and flagests indicate the category of income by disclosed as income for essets held in taxable accounts. Check "None" if no income was earned or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest. | Amount of Income | BLOCK D | Eastman Page 2 of 6 |

Use additional sheets if more space is required.

| | | | | | | | | | : | | DC. | Assets a | |
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| | | | | | | : | | | | | ASSET NAME | BLOCK A Assets and/or Income Sources | |
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE C - EARNED INCOME

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal refirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROMIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

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| | | | Amount |
| Source (include date of receipt for notionalia) | Type | Current Year to Filing | Preceding Year |
| ABC Trade Association, Baltimore, MD (July 15) | Honoranum | \$0 | \$500 |
| Examples: State of Maryland Civit War Roundlable (Oct. 2) | Spouse Speech | \$20,000 \$0 | \$76,000 \$1,000 |
| Chiano County sosition concented | Spouse Settiny | 200 | NA |
| Omaha Healthy Kids Alliance | Salary | 30,000 | 131,000 |
| Creighton University | Spouse Salary | 28,000 | 61,000 |
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SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members are required to report at liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and iabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

| | | | | SP. DC. JT | | |
|--|--|---|---------------------------------------|--|----|---------------------|
| | | | Example | | | |
| | | | First Bank of Wilmangton. DE | Creditor | | |
| | | | 5/98 | Date Liability incurred MO/YR | | |
| | | | Mongage on Rental Property, Dover, DE | Type of Liability | | |
| | | | | \$10,001- \$15,000 | > | |
| | | | | \$15,001- \$50,000 | 65 | |
| | | | | \$50,001- \$100,000 | n | |
| | | | × | \$100,001- \$250,000 | ø | , |
| | | | | \$250,001- \$500,000 | m | moun |
| | | | | \$500,001- \$1,000,000 | 74 | |
| | | | | \$1,000,001- \$5,000,000 | 6 | Amount of Liability |
| | | | | \$5,000,001- \$25,000,000 | æ | |
| | | | | \$25,000,001- \$50,000,000 | _ | |
| | | | | Over \$50,000,000 | ٤. | |
| | | • | | Over \$1,000,000* (Spouse/DC Liability) | * | |

SCHEDULE E -- POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year and two previous years.

| period and the content calendary seal, if their year contents | period did the chieff Calendary year. First carried and test engine year open pour promote year one and any provide years. |
|---|--|
| Position | Name of Organization |
| CEO | Omaha Healthy Kids Alliance |
| Vice Chair | Metropolitan Community College Board of Governors |
| Board Member | National Lead and Healthy Housing Association |
| Spouse - Associate Professor | Creighton University |
| Souse - President | Assoc. of Spanish and Portuguese Historical Studies |
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SCHEDULE F - AGREEMENTS

| | | | | Name: Page 6 o |
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identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee weffere or benefit plan maintained by a former

| Date | Parties to Agreement | Terms of Agreement |
|------|----------------------|--------------------|
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and the prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information flated on Schedule C.

| Source (Name and City/State) | Brief Description of Duties |
|---|-----------------------------|
| Example. Doe Jones & Smith, Hometown, Homestate | Accounting Services |
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